

COMPENDIUM

Transformation Profile Of

FEDERAL MEDICAL CENTRE

Ebute-metta
Lagos



2017 - 2020

A modern operating room with blue walls and a light blue floor. In the center is a large, adjustable surgical table on a metal base. To the left is a mobile medical cart with various monitors and equipment. On the right, a large, multi-lens surgical light fixture is suspended from the ceiling. The ceiling also features a large, circular light fixture and several rectangular recessed lights. The overall atmosphere is clean and professional.

FMC
EBUTE-METTA
TRANSITIONAL
PERSPECTIVE

FMC

Ebute Metta

VISION

To be a hospital that is able to fund developmental projects through increased revenues and partnerships to deliver quality, friendly, affordable medical services by high performing and motivated staff.

MISSION

To sustain a dynamic and comprehensive health delivery system that is effective, efficient and affordable in an atmosphere where staff are proud to serve and public confident to use.

CORE VALUE

- High Professionalism
- Honesty
- Transparency and Accountability
- Focus on Patient Satisfaction
- Cleanliness and Neatness
- Team Work
- Staff Motivation and Development
- Efficiency in resource management.



FOREWORD

Established in 1964 as the Department of Health Services of the Nigerian Railway Corporation, this health institution underwent various levels of metamorphosis until May 2004 when it eventually became the Federal Medical Centre Ebute-Metta (FMC EB). With supervision provided by the Federal Ministry of Health, the tertiary institution has recorded some achievements under the leadership of several Medical Directors.

On the 6th of July 2017, this administration was handed the leadership of FMCEB and the result has been remarkable. On assumption of office, a four-point strategic agenda aimed at improving patient care, staff commitment and productivity was initiated. The four pillars of this agenda are:

- (1) Human Resource Development
- (2) Quality Service Delivery
- (3) Expansion of Service
- (4) Revenue and Alternative Financing

The Four-Point Strategic Agenda has steered the Top Management and staff of the hospital in defining required interventions to address some of the numerous challenges that, for long, plagued the healthcare facility. The transformational change so far achieved was not without its difficulties but rather a result of sheer passion, determination, and support.

Today, FMC EB has become a hospital with tastefully renovated buildings, equipped enough to

expand the scope of services and provide top range healthcare in an environment befitting of its stature, and by highly motivated staff.

Although not yet at its peak, the hospital has gained an enormous amount of recognition from the federal government, other tertiary health institutions, development/partner organisations, and has begun to reignite the trust in public health facilities to deliver quality healthcare services.

This Compendium is a concise collection of the great strides in infrastructural and process upgrades achieved by the current administration of Federal Medical Centre Ebute-Metta as experienced by staff, patients, renowned corporate organisations, and the general public.

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BACKGROUND

Between 1967 and 1970, during the 30-month long Nigerian Civil War, the hospital served as an annex to the Lagos University Teaching Hospital (LUTH), where wounded soldiers were treated. //

What is today known as the Federal Medical Centre Ebute-Metta started in November 1964 as a Department of Health Services in the Nigerian Railway Corporation (NRC) established exclusively to cater to the health needs of staff members and their families. Between 1967 and 1970, during the 30-month long Nigerian Civil War, the hospital served as an annex to the Lagos University Teaching Hospital (LUTH), where wounded soldiers were treated. It was returned to the Nigerian Railway Corporation in 1983 and was designated a referral centre for Parastatals under the Federal Ministry of Transport and Aviation.

The idea of commercialising the health facility was mooted in 1996 during General Gumel's tenure as Transport Minister and from then on was operated as a commercial business entity until 2004, even though it remained under the Nigerian Railway Corporation.

During the administration of President Olusegun Obasanjo, the Federal Government decided to divest itself of certain businesses through the process of privatisation, and the Nigerian Railway Hospital was amongst those shortlisted. The members of staff of the hospital were not pleased with this development; in their opinion, privatization would put services out of the reach of majority of those who needed it. On this basis, an appeal was made to the Federal Government, through the Transport Minister, Dr Abiye

Sekibo, and the planned privatization was dropped.

The Federal Executive Council (FEC) approved the upgrade of Nigerian Railway Hospital to a Federal Medical Centre on the 26th of May 2004. The hospital was formally handed over to the Federal Ministry of Health on 31st January, 2005 as a tertiary healthcare institution and designated as Federal Medical Centre (FMC) Ebute-Metta, Lagos. A three-star rating was awarded the hospital by SERVICOM at the time.

Dr (Mrs.) N. E. Nwosu, who had been the Director, Health Services (DHS) of the hospital, when it was still under the Nigerian Railway Corporation, was appointed the pioneer Medical Director of the hospital in 2004 and was succeeded by Dr. M. Y. Jinadu in 2008. He served until October 2016.

Federal Medical Centre Ebute-Metta has continued to grow and break new grounds. The hospital has upgraded its facilities to include a 24-hour functional Dialysis Centre, an ultra-modern GOPC/Accident and Emergency building, fully equipped with state of the art infrastructure, modern Radio-Diagnostic and Laboratory equipment, and uninterrupted water and electricity supply, to mention but a few. The hospital runs an internship programme as well as accredited residency programmes in Family Medicine, Anaesthesia and Obstetrics and Gynaecology (O & G).



TRANSFORMATION OVERVIEW

Although tenants of the Nigerian Railway Corporation, the Federal Medical Centre Ebute-Metta is run by the Federal Ministry of Health (FMoH). It is a 250 bedded multi-specialty hospital located at the Oyingbo end of the Railway Compound Ebute-Metta, Mainland Local Government Area, Lagos State.

Situated on a small parcel of land with little or no room for horizontal expansion, the hospital is centrally located allowing easy access from all parts of Lagos. Besides the services offered by the hospital across the four major clinical specialties of Medicine, Surgery, Paediatrics, Obstetrics and Gynaecology, services are also offered in Orthopaedics and Trauma. Sub-specialty services provided include, but are not limited to Ear, Nose and Throat (ENT), Ophthalmology, Neurosurgery, Urology, Dermatology, Cardiology, Nephrology, and Histopathology. As a tertiary health institution, residency programmes in Family Medicine, Anaesthesia and Obstetrics & Gynaecology are currently available with increasing effort towards expanding the programme to include Surgery, Internal Medicine and Paediatrics.

As is obtainable at most public hospitals, service disruptions were often experienced due to broken down equipment and insufficient stock of essential materials resulting in referrals of the very sick and cancellation of elective surgeries. Pilfering of revenue generated from service provision reduced available

funds for vital procurements and staff training. Overall, the hospital appeared run down and staff morale was extremely low.

Since the transformational agenda of the current hospital management kicked in, there has been widespread structural renovation and reconstruction of different service delivery units including all Admission Wards, Specialist Clinics, Paediatric Clinic, Dialysis Centre, Intensive Care Unit (ICU), Labour Ward Theatre, Kitchen, Laboratory complex, Radio-diagnostic Centre, General Out-Patient Clinic (GOPC)/Accident and Emergency (A & E), among others. Modern high-tech equipment and furniture have been installed in different departments and have been included in the hospital's maintenance programme.

In addition, the hospital's Laboratory, Radio-diagnostic and Pharmacy services are fully automated and electronic medical records (EMR) has been introduced for effective patient care. The oxygen gas plant has been upgraded to a higher capacity, and two brand new elevators have been installed to ease the movement of patients and their relatives. Capacity building of staff is prioritized as over 75% of personnel are sponsored annually to participate in training courses, and staff are now better equipped and motivated to perform their functions in an enabling environment.

The hospital wears a new befitting look, providing affordable quality healthcare services and expanding its reach to a wider section of the socio-economic spectrum.

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4 POINT AGENDA



Human Resource
Development



Quality Service
Delivery



Expansion Of
Services



Revenue and
Alternative
Financing





PILLAR 1 HUMAN RESOURCE DEVELOPMENT

To rebuild the relationship with personnel and unions, the hospital's Management prioritized capacity building of both clinical and non-clinical staff. This pillar of the four-point agenda has contributed to a more productive health workforce with improved communication between individual staff and their supervisors, as well as the overall staff community and management. So far, training has been achieved via various platforms including:

STAFF ORIENTATION PROGRAMME

The aim is to introduce new staff to the culture of Federal Medical Centre Ebute-Metta, equipping them with basic information requirements, and enabling them ease into their new positions.

SPONSORED PARTICIPATION AT WORKSHOPS, CONFERENCES AND SEMINARS

Different cadres of staff are sponsored annually to participate in various training sessions relevant to their personal and professional development, on a case by case basis.

HOSPITAL GRAND ROUNDS AND CLINICAL PRESENTATIONS

This programme is designed to update

professional staff across different clinical departments on new developments in clinical and research medicine, primarily for the purpose of knowledge transfer.

RESIDENCY PROGRAMMES

The hospital has residency programmes in Anaesthesia, Family Medicine and Obstetrics & Gynaecology with ongoing plans of expanding to Internal Medicine, Paediatrics and Surgery.

ANNUAL MANAGEMENT RETREAT

This is an annual event aimed at providing updates on the current year's work, strategizing for the new year, and obtaining additional knowledge for improved job performance. Participating members of Senior Management represent the departments and units of the hospital. Fitness and team bonding activities are often engaged in during retreats.

STAFF-MANAGEMENT ASSEMBLY

The programme serves as an annual forum for staff to interact freely with management, discussing issues bordering on staff welfare and hospital progress.

"This pillar of the four-point agenda has contributed to a more productive health workforce with improved communication between individual staff and their supervisors"



Cross-section of New Staff during Orientation Programme

To rebuild the relationship with personnel and unions, the hospital's Management prioritized capacity building for clinical and non-clinical staff through the four-point agenda to create a more productive and engaged workforce. The Director of RET discussed with individual staff members on their views as well as the overall management of the hospital. So, the hospital achieved via various



STAFF ORIENTATION



▶ Training of Heads of Departments/Units on Prevention of Corruption in the Workplace by Head, Corruption M&E Department, ICPC

Different cadres of staff participate annually to participate in sessions relevant to their professional development during an In-House Training Programme by case basis.



HOSPITAL GRASSROOTS



▶ Staff Playing Table Tennis during the Annual Staff Retreat in 2019



▶ Cross section of staff during the Staff - Management Assembly

PILLAR 2 QUALITY SERVICE DELIVERY

To improve staff attitude and foster an organisational-wide culture of quality and safety, Federal Medical Centre Ebute-Metta adopted the SafeCare Quality Improvement Methodology. It was the first federal hospital to embark on a quality improvement journey, setting the pace for others to follow. Prior to adoption, the hospital requested resource persons from PharmAccess Foundation to facilitate sessions on Improving Quality and Safety during the annual top management retreats in 2017 and 2018. Findings and recommendations shared following rapid surveys of the hospital on

both occasions informed infrastructural and process improvements currently witnessed.

The Quality Improvement journey using the SafeCare Methodology commenced with a Sensitization Meeting to acquaint staff and was followed by a Baseline Assessment to determine the current quality status of the hospital. Thereafter, a Quality Improvement Plan (QIP) was developed to address identified quality gaps.

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PharmAccess and FMC EB Quality Improvement Team assessing a service-point in the ward



L-R: Dr. Anire Asumah of PharmAccess presenting to the MD/CEO flanked by Head of Finance and Accounts.

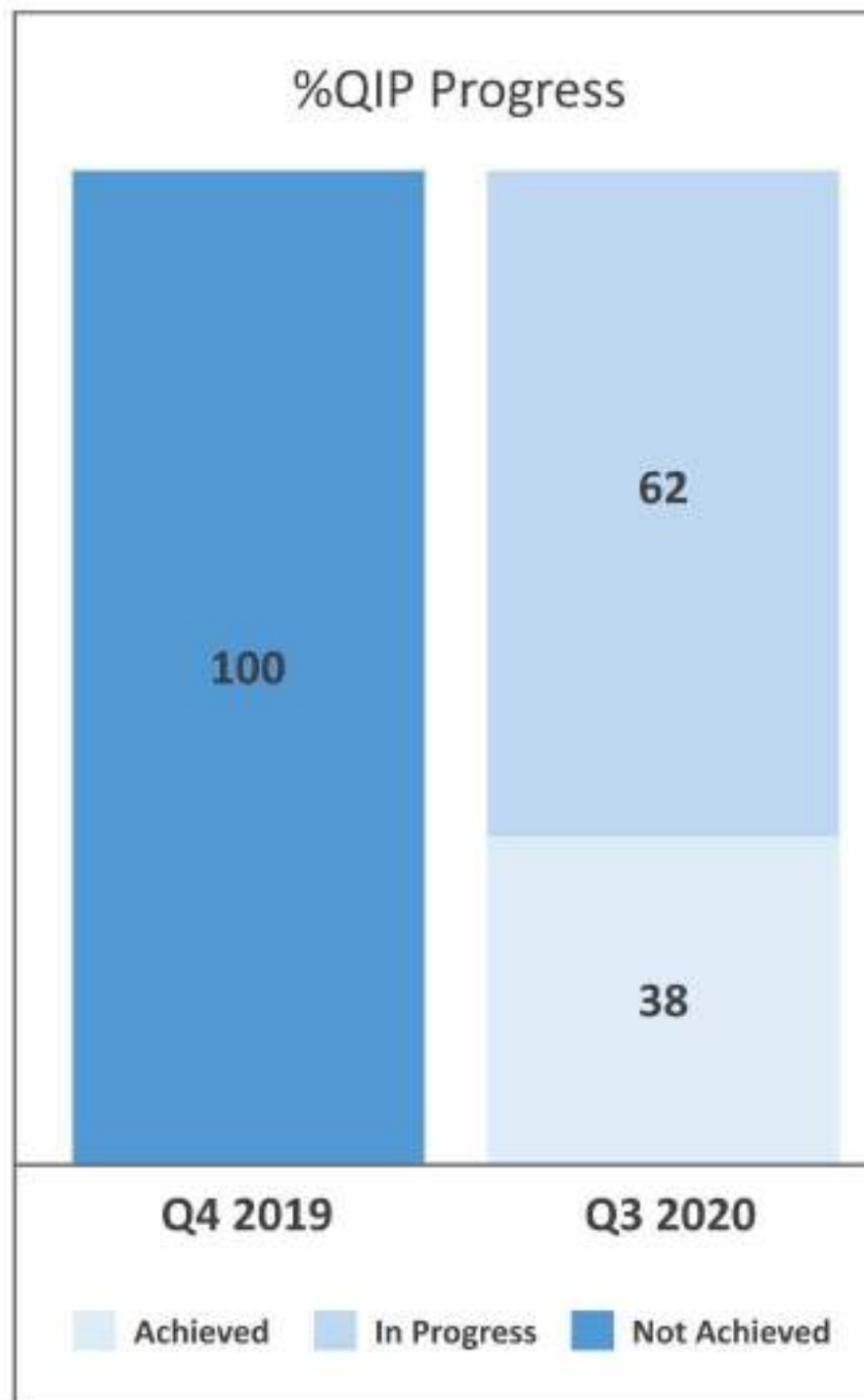


SafeCare assessor conducting an audit on patients' health records



Quality improvement team with the matron of male surgical ward

A Quality Improvement Team, coordinated by a Quality Improvement Committee and representative of all departments / units of the hospital, was set up to drive change and quality service delivery. The PharmAccess team has continued to provide mentorship to the Quality Team with regard to implementing activities in the QIP, conducting periodic monitoring and evaluation visits to check progress. The chart below represents the progress made with QIP implementation.



The Quality Improvement Plan (QIP) was developed based on deficiencies identified during the baseline assessment, prioritizing activities critical to patient and staff safety. At the onset of QIP implementation, 100% of activities had not begun. Today, all activities have commenced and are at various degrees of progress. 38% of activities have been completed while the remaining 62% are being worked on towards full achievement.

Since adopting the SafeCare Quality Improvement Methodology about a year ago, the Federal Medical Centre Ebute-Metta is due for a review of their quality rating. It is expected that the effort put into improving patient safety and health service delivery will culminate in a higher rating than what was recorded at baseline.



PILLAR 3 EXPANSION OF SERVICES

A core and tangible pillar of the management's four-point agenda, renovation of dilapidated infrastructure across various sections of the hospital was embarked on to improve service delivery, staff productivity and efficiency. Apart from improving the general ambience of the hospital for patients accessing care and creating an enabling environment for staff to better perform their duties, the wide spread renovation has resulted in presenting a better imagery to the public. This has led to more patients utilizing services and inadvertently contributed to an increase in revenue generation. The revamping of run-down buildings into functional spaces and replacement of dysfunctional equipment with modern

high tech versions has been the most conspicuous of Federal Medical Centre Ebute-Metta's transformation agenda. These changes have gotten the attention of politicians, government officials and news media to visit and witness the remarkable improvement. The hospital has continued to receive encomium from these witnesses, well-wishers and the general public.

GENERAL WARDS (MALE MEDICAL, MALE SURGICAL, FEMALE MEDICAL, FEMALE SURGICAL, MATERNITY AND PAEDIATRIC)

The general wards are for the admission of patients whose ailments at the time of presentation require close supervision by the managing team. Gender, age and health condition are determinants of the ward of choice for admission. In the past, general wards were poorly lit with required furniture such as beds, bedside lockers and tables either inadequate, dysfunctional or rusty. In some cases, roofs were leaking, doors were not lockable (often in bad shape), floors were slippery, hand washing stations were unavailable for patients, ceiling fans as well as air conditioners were not functional, window nets were torn and there was no form of audio-visual entertainment. Measures to protect the patients right to privacy were absent and sluice rooms as well as toilet facilities were either poorly equipped or not properly

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managed. Although fire extinguishers were present in some wards, they were not serviced and therefore not useable in a fire outbreak. All these inadequacies are not acceptable standards for patient safety, hence the need for renovation and upgrade.

As of today, all wards have been renovated, furnished and equipped, improving patient comfort during hospitalization and creating a more befitting work environment for staff.

- Access control doors have been fitted reducing the influx of patients into the wards, allowing adherence to stipulated visiting times, and ensuring security of individuals and property.

- Wards, including attached call rooms, have been decently furnished with new and modern hospital beds, bedside lockers, work stations, and equipped with appliances as required.

- Polymer floor covering is now installed making general cleaning and removal of stains easy.

- Wards are well illuminated with 24-hour access to electricity and water supply to perform various functions as required.

- Toilets, sluice rooms and kitchenettes are now neat, appropriately equipped and fully functional, in keeping with infection prevention and control. More toilets have been created to adequately serve patients and staff.

- Nurse call systems have been fitted to improve communication between the nurses and their patients.

- Window nets have been replaced at all relevant points, resulting in the reduction of insect and rodent infestation.

- The paediatric ward in particular was fitted with fascinating wallpaper to create an environment of fun and play for the kids. In addition, six life support incubators were provided.

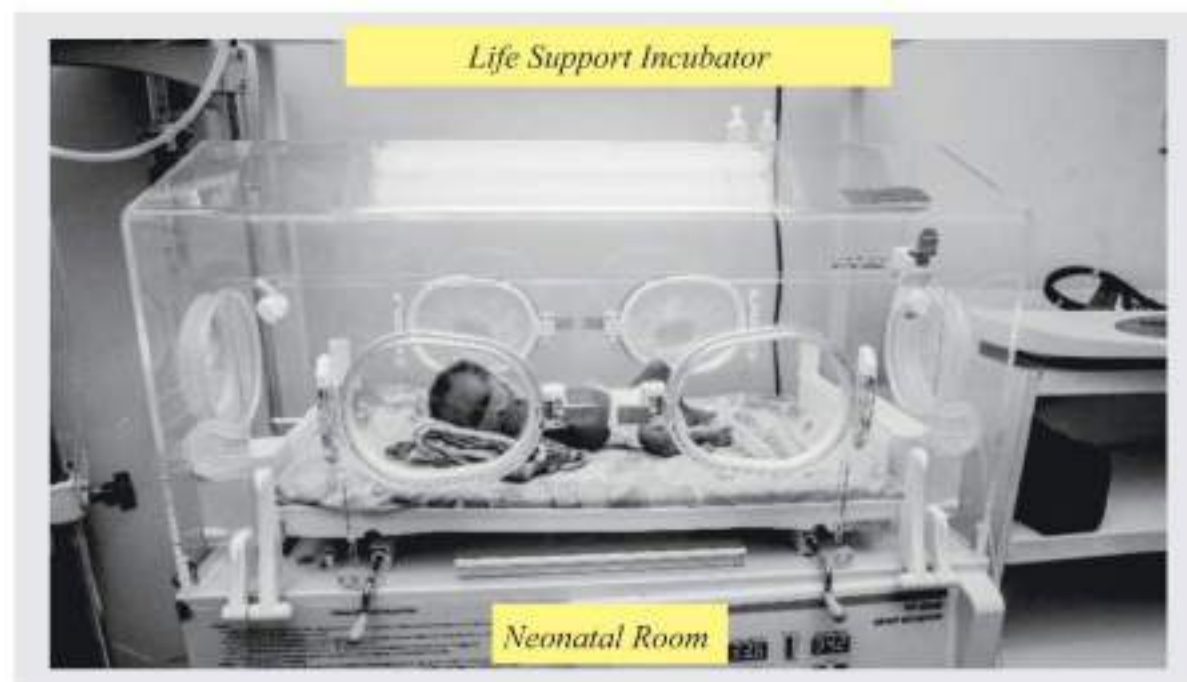
- Patient health records are automated allowing for more efficient documentation and storage. This has drastically reduced the workload according to staff.

Overall, the atmosphere is welcoming, more relaxing, clean, neat and conducive for recuperation. As it stands, there is 100% bed occupancy









PRIVATE WARD

The private ward is designated for the admission of VIP patients and those seeking privacy, away from the general wards. Similar to the deficiencies described for the general wards, the structure of the private ward was dilapidated, illumination was very poor and toilets were in a bad state. Following renovation, medium and executive rooms are now suitable for the calibre of individuals targeted. Rooms are ensuite with toilet, bathrooms and kitchenettes. Floors are covered with polymer, an access control door has been fitted at the main entrance to the ward, there is a nurse call system in every room as well as 24-hour access to water and electricity. All rooms have been furnished and equipped with automated beds, comfortable sofa, wardrobe, television, decoder, water heater, air conditioner, fan and refrigerator, to mention a few. According to the ward staff, this upgrade has led to a more effective and efficient delivery of service, providing timely response to patient's needs. In addition, the private ward receives high patronage contributing a good proportion to the internally generated revenue of the hospital





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Set up to receive internal referrals of patients requiring specialist review and care, the Specialist Clinic experienced both infrastructural and human resource challenges,



PAEDIATRIC CLINIC

The Paediatric Clinic receives children referred from the General Outpatient Clinic or the Accident and Emergency Unit. The problems experienced in the paediatric clinic were similar to what obtained generally including poor maintenance, lighting and ventilation, inadequate furniture and equipment, insufficient workspaces, no handwashing facilities, and no measures to protect the child's right to privacy.

Infrastructural renovation of the Paediatric clinic created more workspaces for staff including consulting rooms, toilets, offices, and a seminar room, as well as an information centre and waiting areas for patients. An attractive and conducive environment was created for the kids with colourful wallpaper, adequate furniture and equipment for uninterrupted service provision. For easy cleaning and decontamination, polymer flooring was used in all areas and plastic chairs were provided in waiting areas.

The children are happier and more relaxed visiting the clinic whilst their mothers continue to share their positive experiences with family and friends. And the result, service utilization from far away Ikorodu, Badagry and Ogun State.

Paediatric Clinic's Cubicle



Paediatric Clinic's Patients' Waiting Hall



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PHARMACY DEPARTMENT

Tasked with the responsibility of ensuring continuous availability of authentic medication for the hospital's patient population, the pharmacy was identified as





MEDICAL LABORATORY DEPARTMENT

The hospital's Laboratory Department is an essential pivot for clinical diagnostic decision making. When adequately fortified with skilled personnel and sufficiently equipped with robust technologies, the laboratory will provide accurate evidence-based information for the diagnosis and treatment of disease conditions in patients. Knowing that gaps in service delivery can lead to misdiagnosis and mismanagement of patients' illnesses, the Medical Director and his team, with backup from development partners, thought it expedient to positively change the narrative by connecting the missing dots.

The level of upscaling brought to the medical laboratory department cuts across infrastructure, third generation Auto-Analyser deployment and highly proficient personnel. Today, there are clearly laid out sections for Haematology, Microbiology, Chemical Pathology, Histopathology, Pathology, Blood Bank, Phlebotomy, Patient Accessioning / Desk Office, Directorate Administrative Offices, Call Duty Rooms, Supply /Inventory Management, Patients Waiting Room and Seminar Room. Highly rated Korean top cabinets to accommodate equipment have been installed.

Also Blood Donors bleeding couches, Auto-Analyser CELL-Check for prompt malaria parasites detection, MINDRAY BS-380 for all Chemical Pathology investigations, MAGLUMI-800 for Endocrine, Serological investigations, etc., HORIBA (PENTRA) for complete blood count / malaria parasites, reticulocytes and CRP detection, RENDER/RENJER-Blood Culture, FUS-1000 for qualitative urinalysis, HPLC (vbns) for neonatal detection/quantity of variants haemoglobin in neonates. Blood bank refrigerators as well as a distinct Laboratory Water Generating System, which brews distilled and deionized water for appropriate tests / laboratory analyser demands, are now in place.

These vital analysers have also been adequately provided with backup analysers which are utilized during call duties or to forestall any form of eventualities. Investigation requests, billing, payments, and result generation processes are by Electronic Ordering, Reporting and Transmission System.

There is no doubt that laboratory service delivery is now highly optimised leveraging the automation, EMRS and highly proficient staff. Cases of missing laboratory results have been totally eliminated, the turn-around-time has improved as test reports are transmitted electronically. Revenue and patient satisfaction has also improved tremendously.



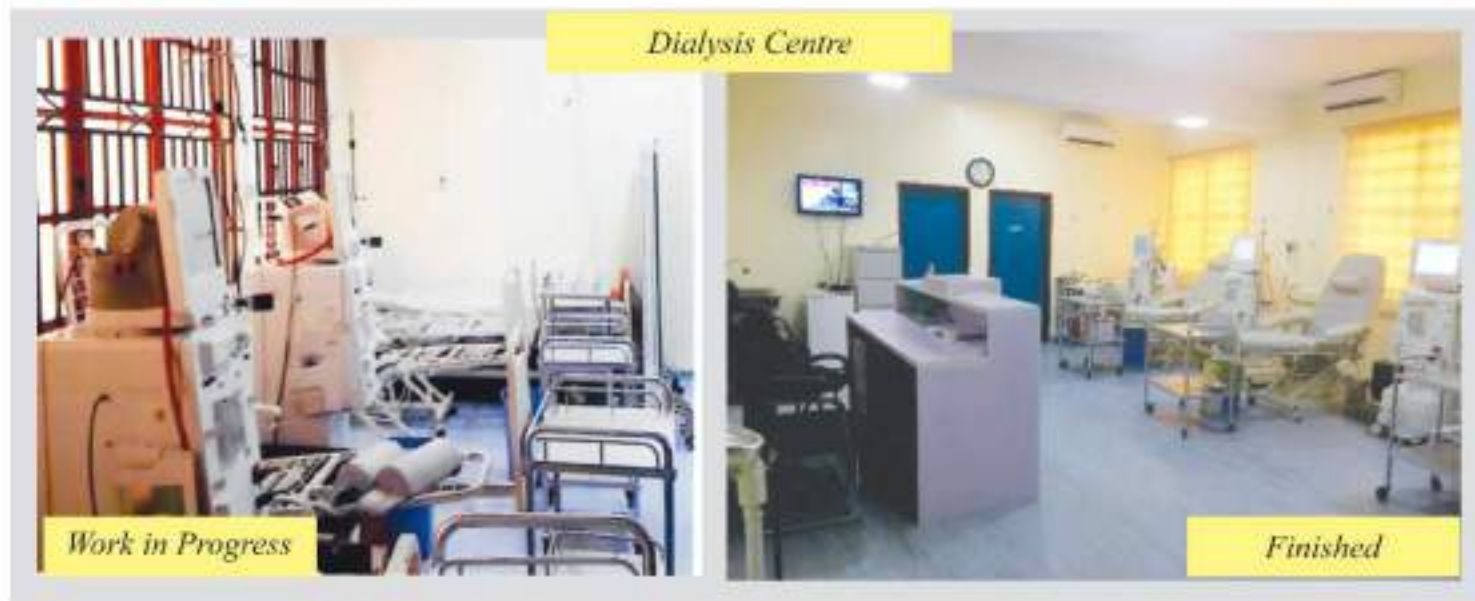




DIALYSIS CENTRE

Dialysis is the process of filtering waste from the blood. The Dialysis Centre at FMC Ebute-Metta provides services to patients with impaired kidney function. Even though initially operated as a Public-Private Partnership (PPP) arrangement, patronage was very low averaging two sessions a month due to incessant breakdown of machines. The renovation was taken to this unit primarily to improve utilization as well as infection prevention practices, and the result has been tremendous. The centre currently runs an average of 78 dialysis sessions monthly and all machines are functional.





INTENSIVE CARE UNIT (ICU)

The hospital's Intensive Care Unit (ICU) provides critical care and life support to acutely ill patients. As sensitive as this unit is, bedside monitors, ventilator, infusion and syringe pump were either absent or non-functional. The ICU has now been restored to full functionality with new ventilators, bed-side monitors, automated beds, infusion and syringe pumps. Service utilization has increased by 1000% as a result of the renovation. For staff, the work place is pleasant and enabling.





LABOUR WARD THEATRE

The Labour Ward Theatre provides normal (vaginal), assisted and surgical delivery services to pregnant women. Before the renovation, the complex had one delivery room and a theatre suite primarily for caesarean sections. Available infrastructure was often overburdened by the high volume of utilization and required expansion to cater to the patient needs.

Presently, there are two operating theatre suites with clearly demarcated recovery areas. This allows the centre to conduct elective and emergency caesarean sections simultaneously. Additional spaces for office and lounge (for relaxation and meals) have been created. Also, there is a constant stock of theatre supplies such as gowns, caps, shoes and head covers, etc. According to a staff member, "I did not realize renovation will be completed so fast. It has catapulted FMC Ebute-Metta to a very high level. This is a laudable and commendable feat". Patient care records are now captured electronically, eliminating loss of documents and creating easy access to patients' information. Even though patient utilization has increased by over 100%, the waiting time has reduced. Standard Operating Procedures (SOPs), based on best practice and internationally acceptable standards, have now been introduced for use by staff.

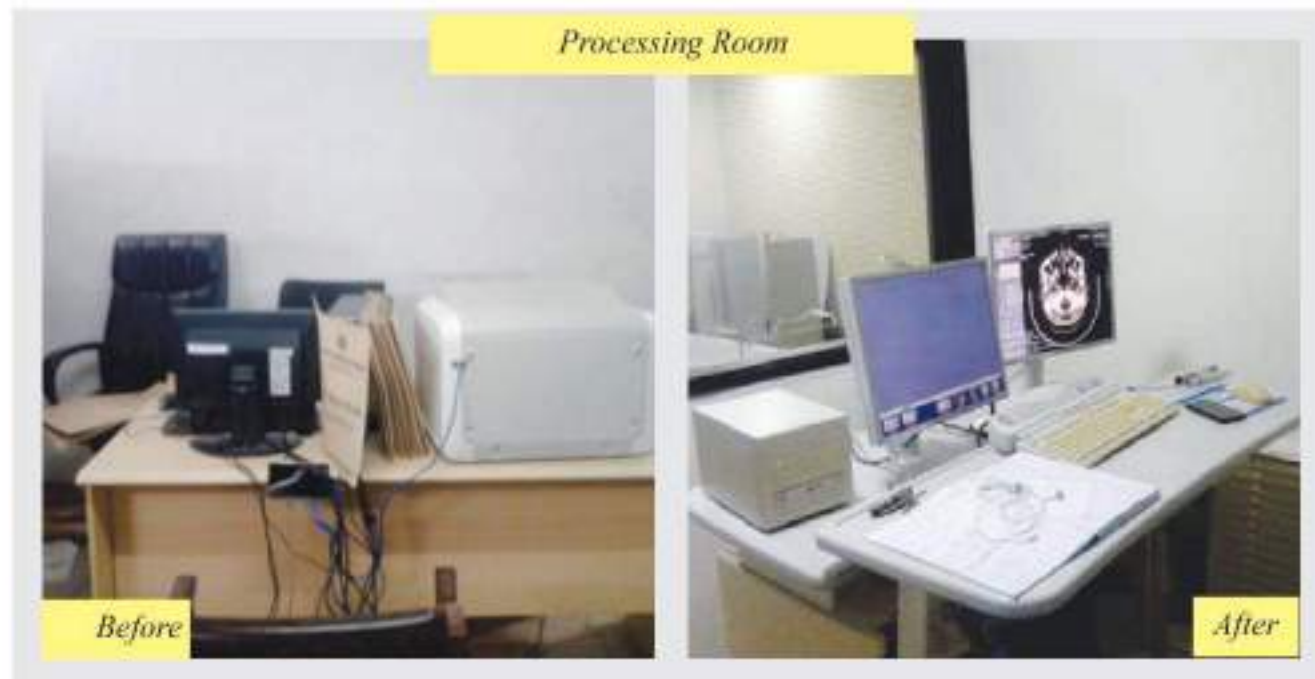




RADIODIAGNOSTIC CENTRE

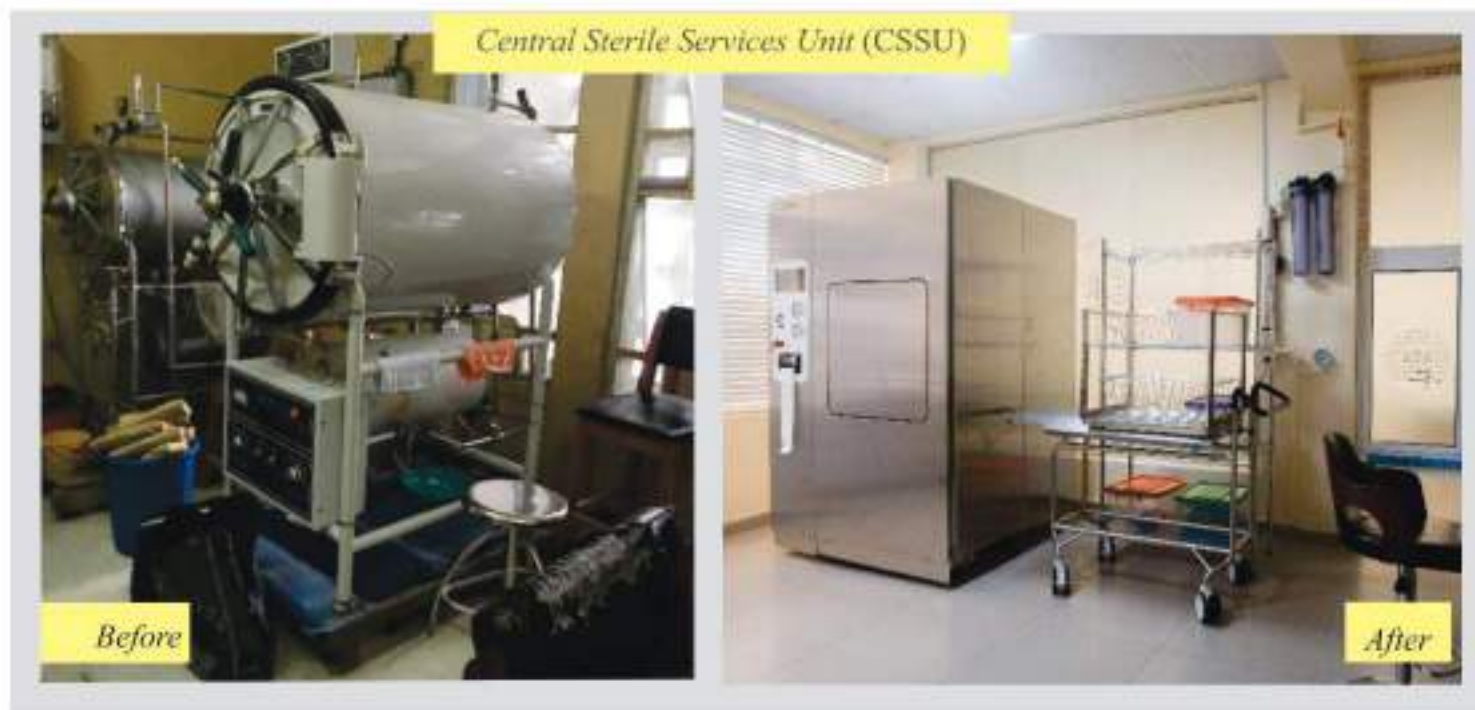
The Radiodiagnostic Centre serves to support the diagnosis and treatment of certain medical conditions using radiation, ultrasound and magnetic resonance. Faced with challenges such as lack of modern diagnostic equipment and frequent breakdown of those that existed, the department was left with no other choice than to refer patients out. This perpetual loss of revenue to the department and the hospital as a whole ignited the transformation currently seen. In partnership with Hospital Assist Nigeria Limited, Federal Medical Centre Ebute-Metta's Radiodiagnostic Centre was upgraded with standard equipment (64-slice CT scan, digital x-ray, mammogram and high-end ultrasound machines) allowing for the expansion of services. The infrastructural renovation has created a befitting environment for both staff and patients accessing care. The patient influx has doubled and this has increased internally generated revenue.





CENTRAL STERILE SERVICES UNIT (CSSU)

Set up for the cleaning, disinfection and sterilization of reusable medical equipment and supplies, FMC Ebute-Metta's Central Sterile Services Unit (CSSU) ran all components of its operations from a single room. The arrangement did not promote infection prevention and control as there was no demarcation between dirty, clean and sterile. An international standard CSSU, providing a largely automated service, has now been built with more space for operations. Used instruments are received at the reception and transferred to a washroom installed with an automatic washer and dryer. There is a separate room for the autoclave machine and a storage room for sterile packs. Arguably one of the best in Nigeria, staff are surprised by how quickly the transformation occurred. A worker said, "one of the most wonderful experiences in FMC Ebute-Metta is to work in the new CSSU".



KITCHEN DEPARTMENT

This department is responsible for providing good quality meals to patients and staff of the hospital, taking into consideration the dietary needs for different ailments and strictly adhering to standards of hygiene. The kitchen was unsightly not to mention its infestation by rodents, contributing to an unhealthy environment for safe food preparation. To deliver on its promise of providing nutritional food to promote healing and full recovery, an overhaul of the kitchen was necessary. It was renovated creating demarcated spaces for food storage and production as well as office and on-call facilities. Required appliances, equipment and infrastructure were provided including fridges, freezers, grinding machines, cookers, food trolley, flasks, water dispensers, access control doors, nets, fly traps, hand washing facilities, etc. Frequent training of kitchen staff, as well as the upgrade experienced, has led to an overall improvement of food service delivery at the hospital.





OXYGEN GAS PLANT

First commissioned in 2009, FMC Ebute-Metta's oxygen plant became difficult to maintain and operate due to the massive fund requirements. The provision of tools, personal protective equipment (PPE) and infrastructural requirements for safe operations became a problem. Oxygen supply for surgeries and emergency was unpredictable as a result of these.

A new oxygen plant was installed, producing larger quantities of oxygen than required at the hospital. Currently, there is a continuous and steady supply of oxygen with excess for commercial purposes and a resultant increase in revenue. Production capacity increased from 16 to 60 cylinders in 24 hours. The plant is regularly maintained for improved service delivery.



ACCIDENT AND EMERGENCY (A&E) / GENERAL OUT-PATIENT CLINIC (GOPC) COMPLEX

The Accident and Emergency unit of FMC Ebute-Metta receives, triages, examines and treats patients with injuries and life-threatening illnesses while the General Out-Patient Clinic receives non-emergency walk-in patients and external referrals. Co-located in the same building and challenged with major space constraints, the A&E and GOPC were restricted in providing the right infrastructure and equipment for quality service provision. The need for expansion became imperative to enable effective service delivery. The hospital management had to pull down the existing building for full-scale expansion.

Today, sitting on the same land space is an ultramodern Accident and Emergency Complex made up of the A&E, GOPC and CSSU (Central Sterile Services Unit). The entire ground floor is dedicated to providing services to emergency cases whilst the General Out-Patient Clinic occupies the larger wing of the top floor. Also on the top floor is the CSSU and the COVID Connect Centre.

Furnished with state of the art equipment, the complex has two theatre suites and measures to protect the privacy of patients. There is no doubt that FMC Ebute-Metta is a trailblazer, setting an example for all other federal institutions to follow. Staff are better equipped to perform their functions in a comfortable and enabling environment.

GOPC / A&E Building



GOPC / A&E Building



Before



After



New A&E Operating Theatre



New A&E Consulting Rooms



OFFICES / SEMINAR ROOM

Offices and the seminar room often had inadequate furniture some of which were broken down. Consultants and heads of departments had to share furniture within their assigned offices. Refurbishment of these spaces has created a more conducive environment for learning, meetings and administrative work. Old furniture have been replaced with new and functional ones adequate for the number of individuals using the space. The seminar room has been fitted with a multimedia system (projector, screen, laptop, microphones, speakers, etc.) and air conditioners.



OTHER AREAS OF UPGRADE

The patient lifts, which were abandoned for over 20 years due to damage of various parts, were replaced and returned to full functionality. This has eased the movement of patients and their relatives within clinical areas, particularly those who are wheelchair bound.

Internal roads, parts of which were not motor-able and filled with potholes, have been graded, tarred, and fitted with interlocking blocks. All access roads have been repaired and this has beautified the hospital environment.

The roofing system of the main hospital building, after having been in place for decades, had weakened. Structural problems developed leading to leakages which resulted in damage to walls, medical equipment and office materials. The roofing system has now been replaced with structural steel and modern aluminium.

Elevators



New Roof of Main Building









PILLAR 4 REVENUE AND ALTERNATIVE FINANCING

Funding is a critical component of any transformational agenda. Faced with huge debts owed to contractors, pharmaceutical companies and vendors, and the need for a constant flow of income for general operations of the hospital as well as stocking of essential commodities, the current management of Federal Medical Centre Ebute-Metta sought ways to change the status quo.

To execute the disruptive change envisioned by the serving Medical Director of the hospital, substantial funding was required. Exploring partnerships and external investment was a consideration however, donors and investors need proof that their investment will be properly managed. This meant that the team had to look inwards to increase internally generated funds, manage said funds and show willingness for genuine upliftment of the hospital.

Identifying that the hospital's accounting system was faulty leaving room for pilfering and diversion of funds, the

administration's approach was to block all points of leakage.

DIGITAL TRANSFORMATION

FMC EB is at the forefront of digitalization to improve efficiency in service provision. Majority of accounting, stock management and clinical processes are now digitally managed.

Automation Of Payments

The fund collection system was automated and Remita brought in for collection of payments. This process resulted in an immediate increase in Internally Generated Revenue (IGR) by 100% in the first month and a decrease in expenditure by 25%. IGR continues to increase as patient utilization increases making funds available for infrastructural upgrade and renovation.

Electronic Medical Records (EMR)

Paper-based records are being phased out at FMC EBute-Metta following the introduction of an Electronic Medical Records for patient health information



Patient's EMR Card



Funding is a critical component of any transformational agenda. Faced with huge debts owed to contractors, pharmaceutical companies and vendors, and the need for a constant flow of income for general operations of the hospital as well as stocking of essential commodities, the current management of Federal Medical Centre Ebute-Metta sought ways to change the status quo. To execute the disruptive change envisioned by the serving Medical Director of the hospital, substantial funding was required. Exploring partnerships and external investment was a consideration however, donors and investors need proof that their investment will be properly managed. This meant that the team had to look inwards to increase internally generated funds, manage said funds and show willingness for genuine upliftment of the hospital.

Identifying that the hospital's accounting system was faulty leaving room for pilfering and diversion of funds, the administration's approach was to block all points of leakage.

DIGITAL TRANSFORMATION

FMC EB is at the forefront of digitalization to improve efficiency in service provision. Majority of accounting, stock management and clinical processes are now digitally managed.

Automation Of Payments

The fund collection system was automated and Remita brought in for collection of payments. This process resulted in an immediate increase in Internally Generated Revenue (IGR) by 100% in the first month and a decrease in expenditure by 25%. IGR continues to increase as patient utilization increases making funds available for infrastructural upgrade and renovation.



ased

L-R: The Head, Corporate Services FMC EB, Mr O. J. Ayoola (centre) introducing Dr. Orelu of Nigeria Port Authority to the MD/CEO of FMC EB, Dr. Adedamola Dada, flanked by Neuro-Psychiatry hospital's MD/CEO, Dr. (Mrs.) Ogun



"Today, FMC EB has become a hospital with tastefully renovated buildings, equipped enough to expand the scope of services and provide top range healthcare in an environment befitting of its stature, and by highly motivated staff"

**DR. ADEDADAMOLA DADA, MBBS, FMCS, FWACS, FAO, FICS
MEDICAL DIRECTOR/CEO FMC EB**

There have been a number of testimonials to the ongoing transformation at Federal Medical Centre Ebute-Metta, mostly reacting to the level of infrastructural development, state of the art equipment and improved service provision.



Nigerian public hospital where nurses treat patients with respect and system is digitised

February 11, 2020

by Taiwo Adebulu 10 Comments



A Nigerian public hospital treating patients with dignity and respect? That must be a contradiction in terms. But it is a true life story.

In January, an [undercover investigation by TheCable](#) had exposed the rot at the Federal Neuropsychiatric Hospital, Yaba, Lagos. The undercover reporter spent 10 days on admission in the hospital tracking corruption — after going in pretending to be a drug addict requiring rehabilitation.

While the anomalies uncovered at the Federal Neuropsychiatric Hospital were still generating reactions, a patient called the attention of TheCable to the Federal Medical Centre (FMC), Ebute Metta. Unlike “Yaba Left” where there was poor service delivery, arbitrary charges and mal-treatment of patients, the comments on this particular government hospital were glowing. TheCable decided to visit the facility undercover.

Tucked in the belly of the vast land housing the Nigerian Railway Corporation in Ebute Metta, the hospital captures the imagery of a utopia in a desert. Formerly the Nigerian Railway Hospital, the facility was inaugurated in November 1964 by the late Nnamdi Azikiwe, then president of Nigeria, to cater to the needs of workers and members of the once-booming corporation. In 2004, the hospital was commercialised and upgraded to a Federal Medical Centre (FMC).

testimonials





Welcome to FMC, Ebute-Metta

NO DELAY IN GETTING MEDICAL ATTENTION

As early as 11am in the morning, the general out-patient clinic (GOPC) was already crowded as this reporter joined other patients sitting under the canopy. One of the officials from the medical record department handed the short registration form to the new visitors. Within a few minutes, a middle-aged woman had inputted my data into the laptop and pointed me to the payment desk where I paid N1,250 for e-registration and consultation fee. A payment receipt was immediately generated through an electronic channel after which I was handed a card, like an ATM card.

"That's your electronic card. It contains your record with the hospital. Bring anytime you are visiting," an official instructed as he directed me to the waiting room to see the doctor.

Each official at the record department had a laptop. The young doctors too had on their tables. Shittu, one of the doctors, swiped my card with the reader as she confirmed my details and asked what the problem was. She smiled and interjected at intervals as I explained the nature of bacteria giving me nasal irritation. Then, she began to register my complaints in the computer as she referred me to the ear, nose and throat (ENT) specialists.

At the pharmacy, the officials asked for my e-card, swiped on the card reader to access information on the doctor's prescription. There was no way I could see what was prescribed or possibly have access to it. I was only informed of the content and amount. The pharmacist directed me to the payment point where I presented the card again. From there, I moved to the billing point where the payment was ratified.



Back to the pharmacy, I presented the electronic bill and the drugs were dispatched. Aside the payment points coordinated by Remita, officials of the hospital did not ask for extra cash or further payment. All they asked for was the e-card which reflects the patients' medical and financial history.

'PAY CASH AT YOUR OWN RISK'

When I spoke to a nurse at the specialist clinic, she said paying money to any member of staff is at the patient's risk as it will not reflect on his/her record online. "Only those at the payment point can collect any form of cash. It goes straight into your electronic account and any staff attending to you will see that you have paid for the service you have come for. Any other staff caught collecting money from patients will be penalised. So, they'll rather refer you to the payment point," she said.

I later learnt that the hospital introduced an electronic medical record (EMR) system in August 2019 to curb sharp practices among its officials. At the radiography department, Umonnam Uwem explained, with the patience of a skilled teacher, the function of the modern computed tomography (CT) scan using an onion as analogy. While she tabled one hand and straightened the other to form an imaginary knife cutting a fresh onion, the director proceeded to demonstrate how the massive doughnut-shaped machine, procured four months ago, scans the body in slices to produce a vivid cross-sectional imagery of what is happening inside.

Not until when the onion is properly sliced can you identify if parts of it is decaying even while it looks fresh on the outside, Uwem explained. From there, she moved to the mammography and illustrated how the procedures are captured in the computer system, including how they are digitally processed and sent to the central system.

Typical of most public health institutions in the country, FMC suffered years of neglect with regards to infrastructural decay. From leaking roofs, inadequate equipment, poor electricity supply and lack of transparency, corruption thrived aplenty.

STIPULATIONS



'STAFF USED TO PRINT THEIR RECEIPTS'



Medical record staff attending to patients with courtesy

The process of sorting the wheat from the chaff began in 2017 when a new management came on board. In slicing through the “onions” to diagnose and treat the decomposing system, the management digitised its clinical and financial services. But the change did not come that easy.

“When we came in the payment mechanism was such that patients brought their money from their homes and handed over to our staff and so the issue of printing receipt was not unknown. People printed their receipts, give their receipts, collected the money,” Olorunfemi Ayoola, the hospital's head of corporate communication, told this reporter in an interview.

“That and many other issues were prominent. In any case, the subsequent outcome when we stopped that has proven that it was extremely very prevalent because the very first month we stopped that, we had almost 100% increase. Fortunately for us, the federal government had started the TSA procedure that says that all money must go into the federal government's account. The federal government itself had appointed an agent for that purpose. And that agent is Remita.

“So, what we did was to bring in Remita. Any payment that is going to be done in this institution should be done to you. So, what our staff just do is basically to confirm that the payment is in consonance with the service that is about to be rendered. If you have paid N10,000 for some drugs, call our staff to pay directly to Remita and it goes directly into our account and the MD can monitor it on his phone real time. He is not the only one who can monitor it. The accountant will monitor it and the auditors are monitoring it.

testimonials



“You are coming into the hospital, you think you are going to spend a week and they have given you a bill, you can pay for instance, N100,000 into your wallet electronically and all you have to do is take your card to the service point and then pay. We deliberately made it such that you still need your ATM before we can debit you, so that you are also aware of the debiting process, so that there is no controversy.”

According to Ayoola, bringing the EMR system to improve the hospital's financial base has not rendered the staff redundant, but it has only changed their roles. On the bidding process, he said the hospital has been very open and follows the public procurement process which has made it hard for anyone to bypass the established process.

“We also have POS, so if you don't want to pay directly to Remita by cash, you can pay by POS. But as it is today, since the last two years or thereabouts, none of the staff has collected money from any patient. All that we have been able to do is to put in checks and balance to be sure that the government appointed agency is also very faithful to the system.”

NO MORE MANIPULATIONS



Adedamola Dada, MD of FMC EBute-Metta

STRENGTHS



With about 55,000 patients and 1,200 staff on the EMR system, Abdujelil Toyinbo, the IT consultant, said the era of manipulations is gone as all wards and departments in the hospital are connected to the system.

“We can monitor the allocation of bed spaces and the flow of money every second. It has created transparency, accountability in the work flow,” Toyinbo said. Omolola Awe, a matron who heads the anti-corruption and transparency unit at the centre, said members of her team move round the wards and departments unannounced to observe inadequacies and report to the management. Hence, all staff are kept on their toes.

Lending credence to that, Adedamola Dada, the medical director, said reducing graft and creating efficiency in public institutions is all about entrenching a sustainable system.

“Basically, that is why I said that what we are building is a system. It is a culture. We are on a quality improvement programme of our system,” the MD said. “In fact, most public policies are targeted at creating a good system. And once you don't have the intention of subverting it for personal gains, then there is no headache. For procurement law, when I came in, I insisted we must follow it and it worked. And we created a system for it to work. There is no public policy that is hampering my capacity to deliver.

“For me the biggest strength that I have here are my members of staff and they are also my biggest weaknesses. We keep doing the training, talking, appealing and for me that is the biggest challenge.”

PATIENTS ADAPTING TO THE DIGITAL PROCESS



The FMC Ebute Metta e-card

According to Toriola Yusuff, one of the patients, the new initiative makes life very easy unlike the system where he moved about with a paper card from one ward to the other. For Yusuff, he accesses medical services after and spends fewer time at the clinic anytime he visits.

“This is my card too. I keep it beside my ATM card in the wallet in case I need to come here as a matter of urgency,” Yusuff said. “This is the kind of services I enjoy. I want it done fast with quality. Most importantly, it is affordable. It makes me trust the process more.”

According to Ayoola, the hospital welcomes about 5,000 visitors monthly. “We have done our study and we saw that half of the time patients spend in the hospital, they are sitting down while we search for their case notes. Some of those case notes have not been used in one year. We became the only hospitals in this country whose GOPC works till 8pm, all others close 3 to 4pm,” he said.

James Odofin, one of the doctors, said he could easily access patient's medical history from his laptop or computer tab. “Patients can be reviewed at any time without the record officers coming around. Then, we can keep track of the last official who saw the patient, the date and time. It's good for statistics. I'm now very careful in putting down things because anyone can see it and it cannot be deleted.”



The new medical gas plant

testimonials



Taking over a medical facility with little and outdated equipment at assumption of office, Dada said he realised that the centre could not raise the huge amount required to fix the overwhelming challenge of infrastructural decay. While the centre continues to procure more equipment, he initiated the PPP re-agent placement in September 2019 to bring in private sector investment. From the microbiology, haematology labs to the blood bank, the spaciouly neat rooms are decorated with all sorts of heavy machines that run into millions of naira funded through the PPP. Patients no longer go outside to conduct tests. With the state-of-the-art facilities, it now takes less than five minutes. According to the MD, the mission is to reduce medical tourism abroad and give Nigerians quality service.

“It is effective in that it is able to bring in the critical resources that we need, so that the resources we have can be diverted to other areas that are not viable in terms of PPP,” Dada said.

“We can divert to areas of taking care of the indigents because our policy here is that we don't reject patients. We treat first before we ask for money. For me, the aim is not profit to the hospital. The aim is service to the hospital.”

Few meters away from the dialysis centre stands the massive medical oxygen plant inaugurated early January. According to the operator, it produces a minimum of 60 cylinders of oxygen a day, meanwhile the centre only needs half of it. Based on this factor, the management began the process to commercialise the facility to help other hospitals meet their oxygen needs.

“A hospital collects 240 cylinders from us in one month,” the operator said.



A ward at the hospital...clean

Despite its small space, one of the most fascinating sights at the 210-bed centre is the private ward. As the electronic door opened, I was ushered into the well-paved ward where it is one patient to a room. For the platinum, the patient parts with N120,000, executive N90,000 and standard N70,000 – just for one week. Even in dire medical condition, the rich here bask in absolute comfort as the rooms are fitted with kitchenets and all sorts of extravagance.

But Dada said it doesn't end there until the plans to bring artificial intelligence into the system within two years is achieved. And then to more complex procedures as endoscopic and keyhole surgeries.

“Every patient would have his own monitor from which data will be streamed to the nurse. And then we are going to have two new theatres and a central sterile services department (CSSD). Our target is to have the best CSSD,” he said on a final note.

Bidding the medical centre goodbye to face the blarring horns, I encountered the static traffic and smelly gutters of Ebute Metta with a nostalgic feeling for a reporter who had set out to observe the familiar narrative in the Nigerian public health system, but returns home with a story of hope.

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The Guardian

Patients commend e-medical registration process at FMC

By NAN

08 January 2020 | 11:40 am

Some patients at the Federal Medical Centre (FMC), Ebute Meta, Lagos, on Wednesday described the newly introduced Electronic Medical Record (EMR) registration by the hospital as less tedious.

They told the News Agency of Nigeria (NAN) that the e-medical record introduced in September 2019 had replaced the patients' cards and paper files.

NAN reports that the e-medical card bore FMC's logo and name inscribed on it with a digital code.

Commenting, Mrs Beatrice Agu, a teacher, who visited the facility, told NAN that it took her just 20 minutes to finish the process of obtaining the new electronic card.

"I would have come for my card last year but I kept postponing it, thinking the process will be tedious, but to my surprise, it took me only 20 minutes to get the new card.

"This will help to quicken the hospital's service delivery to the patients," she said.

Also, Mrs Beatrice Alonge, a trader, while commending the new initiative, told NAN that the process of registration was made easy due to the number of individuals assigned to carry out the task.

"The process is very fast and lots of people have collected their cards within a short period of time of their arrival.

"The initiative is good and it will go a long way to ease the stress that patients normally go through to get medical attention," she said.

Similarly, Mr Isaac Chukwuma, a businessman, said the process was less stressful, adding that the registration fee should be reviewed downward.

NAN reports that a patient was being charged N1, 250 for registration and issuance of the digital card.

According to Chukwuma, the idea is good and innovative, but the management should consider reducing the charges for the e-medical cards.

Also, Grace Ejike, a student, lauded the hospital management for the initiative, saying that it was long overdue.

"The last time I was admitted here in June, people in the record department spent about one hour before my card was found; but I know with this e-card, there will be no more delay," she said.

The Assistant Director, Corporate Services of the hospital, Mr Olorunfemi Ayoola, said the EMR has helped to ease the stress of accessing health services being provided by the hospital.

Ayoola said that the initiative was part of the several measures being adopted by the hospital management to upscale and enhance its service to patients.

"Dr Adedamola Dada, the Chief Medical Director, is always keen on the delivery of quality and swift services to patients, and that is why this and other projects are ongoing," he said.



*One of the obstetrics theatres equipped with state of the art operating equipment.
Photo credit: Nigeria Health Watch*

FMC Ebute Metta Is Restoring Nigeria's Confidence In Public Health Centres 4
By [Chibuike Alagboso](#) on March 24, 2020 [Torchlight Series](#)

Alex (not real name) got a new job and moved to a new city in early 2018. He considered himself one of those Nigerians who “hardly get sick”. But this changed in 2018. He suddenly fell ill and needed medical attention. He searched and visited one of the private hospitals used by his employer's Health Maintenance Organisation (HMO). He decided to use a private facility, despite having friends in various public health centres located in the city.

Ahead of the 2018 general elections, Nigeria Health Watch conducted a citizen's perception survey in partnership with NOI Polls. The [survey](#) polled 1000 respondents across the country on their level of confidence in Nigeria's health system and sought to find out if citizens consider health when they vote for candidates. Twenty-six percent felt confident in the health system, 30% felt somewhat confident while 44% didn't feel confident at all.

Both Alex and 44% of Nigerians have something in common, a lack of confidence in Nigeria's health system to take care of them. This lack of confidence is even greater when it comes to accessing public health centres, and most Nigerians who can afford it often opt to access care at private health centres.

But there are exceptions as the Federal Medical Centre (FMC) Ebute Metta in Lagos State may well convince Nigerians that public health centres can still be trusted to deliver quality healthcare.

STORIES



*The Nursing station at the busy specialist clinic of FMC Ebute-Metta.
Photo credit: Nigeria Health Watch*

Pillars of excellence

Medical Director (MD), Dr Adedamola Dada took over leadership of FMC Ebute Metta in July 2017 with four distinct areas he wanted to significantly improve in mind. They are:

- Improvement of human capital development and staff motivation
- Infrastructural improvement and expansion of services
- Improvement in finances, transparency and partnerships
- Improvement in quality of care and service

These were bold and ambitious goals, but he had a simple belief—that country-wide change can only happen when “*people who have the passion and capacity come forward to serve.*” One of the reasons Nigerian doctors emigrate to other countries, according to this [survey](#) by NOI Polls and Nigeria Health Watch, is exactly the first area Dada wanted to improve at FMC Ebute Metta: human capital development and staff motivation.

Dada and his team setup a system that rewarded hard work and ensured staff are well motivated. He shared an important insight that helped achieve this. “*I recognise that in every system, there must be rules and when people fall short of them, then a robust disciplinary process, that is also very fair and just, can and should be applied,*” he said.



Improving the infrastructural deficits in the facility required finance and Dada knew this had to be generated internally. His team set up an electronic medical record system, which helped stop diversion of funds by some staff members, he said. They were then able to increase the revenue generated and this made funds available to revitalise the hospital.



Contact numbers of some key hospital management are put up on various parts of the hospital for patients to give feedback on quality of service received. Photo credit: Nigeria Health Watch

A 360-degree improvement at FMC Ebute Metta

"Whatever you are seeing now is the new FMC," Mr Ayoola Olorunfemi, the Head of Corporate Services, declares as he proudly shows off different departments and explains the work they have put in place to bring change. The improvements have happened across the length and breadth of the hospital. *"The hospital started as the old railway hospital in 1964 before becoming an FMC in 2004. Most of the structures were old and dilapidated,"* Ayoola said.

The work started with installing a digital health system. When a patient visits the hospital for the first time, they are issued a digital card that resembles an ATM card. Every transaction from then on is done with the card—payment for consultations, and payment and access to laboratory, radiological or pharmacy services. Once the patient gets to any of these points, all they need do is present their card, which is swiped, and their details are displayed on the computer screen for further assistance.

At the dialysis section, an attending nurse explains that the department runs competitive services with the help of specialists and other support staff.

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FOUR PILLARS OF IMPROVEMENT BY FMC EBUTE METTA NEW ADMINISTRATION

-  **Expansion of services**
-  **Finances, transparency and partnerships**
-  **Quality of care and service**
-  **Human capital development and staff motivation**



Image credit: Nigeria Health Watch

The facility's chief engineer, Ezekiel Adenigba said they generate more oxygen than they can consume. Previously they could not generate enough to serve their patients, but they have installed an oxygen plant that can generate 60 cylinders every 24 hours compared with the former that struggled to generate 16. The hospital now sells the excess oxygen to other hospitals, generating revenue.

If you visit the family planning/immunisation unit, you are sure not to spend more than 35 minutes. "We received a clear mandate from the CMD and the SERVICOM people and this was to ensure our patients are out by 11am," says the officer in-charge, Mrs Folake Adebayo. The well organised unit has sections for different purposes — group counselling, private counselling, and an insertion room. Wednesdays, Thursdays and Fridays are immunisation days, while Mondays and Tuesdays are for family planning services, Adebayo said.

As at 2pm, the General Outpatient Clinic (GOPC) was already done with the 96 patients that visited that day. On some days, the staff nurses say they can attend to over 159 patients during the morning shift. Unlike most hospitals, they operate a two shift GOPC which ends by 8pm. Despite the number of patients, they still attend to them in record time with the help of the 11 doctors currently working in the unit. One thing that helped make this possible is the Electronic Medical Record (EMR) system. It reduced patient wait time because it saves the time spent looking for and moving around patient files and records.





Patients waiting for consultation at the specialist clinic of FMC Ebute-Metta. Photo credit: Nigeria Health Watch

All units have gone through extensive facelifts. Ayoola explained that one strategy that helped the hospital achieve this are the public private partnerships they have in place with various organisations. This seems to be working effectively as staff are focused on delivering their best possible care. He added that the hospital also has an infection prevention and control committee that ensures that the environment is always safe for patients and care providers.

There are instances where patients are unable to pay for healthcare, but the hospital's first focus is to save lives, Ayoola said. After a patient is seen, the social unit takes over to ratify payments and, in most cases, fees are either highly subsidised or waived entirely. Ayoola said the hospital also generates revenue from private wards which offer premium services and these funds help subsidise for people who can't afford to pay.

Not relenting, but moving forward

Good work hardly goes unnoticed, especially with the ease of sharing information on social media. The hospital received commendations from Nigerians when pictures of the developments happening surfaced online. Two reputable media organisations even went on their own fact-finding mission to [verify](#) the claims and from their [reports](#), it's evident they weren't disappointed.

testimonials



Patient wait time has improved since the introduction of the digital card that is used to access all services in the hospital. Photo credit: Nigeria Health Watch

But the best evidence of the impact of the efforts always come from patients such as Winifred Otokhina who said she has been using the hospital for over 10 years. When asked to rate the quality of service she is receiving, she said “80% because of the care, the hospital environment and automation in place”. She also said there's been “tremendous changes” over time since she has been receiving healthcare from them.

While it's obvious no system can ever be 100% perfect, this patient's rating shows there are still opportunities for improvement as the hospital strives to deliver quality healthcare. While technology can be an important enabler of positive change, it can also be a deterrent, especially when there is network downtime. This means the IT unit must be on top of their game to provide uninterrupted services. They also have to ensure all staff are IT compliant in order to maximise the potential of the EMR System.

While there may not be a one-size fits all approach to effectively leading big public health establishments, it's very important for potential leaders to adequately prepare before taking up such major responsibilities. Tailored executive trainings on leadership and [patient centred care](#) can help prepare them and their team for these roles especially those transitioning from clinical practice.



The oxygen generation plant installed by the new administration generates enough oxygen for the hospital use. Photo credit: Nigeria Health Watch

Everyone seems to have forgotten the [crisis](#) at FMC Owerri five years ago that led to numerous strike actions and even physical confrontations. While a lot of sides gave their reasons, it was probably a resistance to change or failure of leadership to effectively communicate visions and get buy-in of staff members.

There are important lessons to learn from Dr Dada and his team as change management is not easy. Health care leaders and indeed every leader must learn how to sell their vision in order to face minimal resistance from the people they are leading. This way, they can continue building and leading health facilities that Nigerians like Alex will be more confident to use.

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MONDAY, MARCH 16, 2020

testimonials



**Mamora inaugurates complex at FMC,
Ebute Metta**

August 28, 2020

by Taiwo Adebulu



Olorunnimbe Mamora, Minister of State for Health, has commended the management of the Federal Medical Centre (FMC), Ebute Metta, Lagos state, for the complete digitalization of its clinical services.

Speaking on Friday at the inauguration of the accidents and emergencies building complex, Mamora described the services at the public health facility as impressive.

He urged officials of the hospital to continue to raise the standard of quality healthcare to Nigerians.

“Before I came for this assignment, I have heard so much about the Federal Medical Centre Ebute Metta in terms of blazing the trail in so many areas. Coming here today, I have a sense of satisfaction in terms of what the team here under the leadership of Dr. Adedamola Dada has been able to do,” the minister said.



"This is impressive. The team has been able to raise the bar in terms of quality standard, which is what we expect, despite being in COVID-19 pandemic period. I was amazed to know the amount being charged. It is next to free. Everything is automated. This is something highly commendable.

"The building we are commissioning today, as I was told, started barely eight months ago. Despite the pandemic, the project has been completed in record time."

Speaking at the event, Ishola Balogun-Fulani, chairman of the hospital's board of management, said the facility is at the forefront of a digital revolution in the health sector.

"We are a family here. It is therefore not surprising that our hospital is leading the way in transforming the health landscape in Nigeria," he said.

"We have jettisoned paper and pencil administration in our clinical services in this hospital. All our clinical services from registration, consultation, prescription, laboratory requests and results, patients notes and even payment system are all automated and electronic."

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SEE SOME TWEETS

Tweet

SEYLAW FAST&FUNNY (@seylaw1)

I must commend the Mgt of FMC Ebute Metta. The transformation of the place is quite unNigerian (permit me). I grew up in Ebute Metta and I know what that place use to be, but recent reviews have been amazing. Kudos to the Mgt and staff.

FMC EBUTE METTA LAGOS (@fmceblagos) · Jan 16

The hospital's Oxygen plant has been upgraded to produce 60 cylinders in 24 hours. This development will help in ensuring continuous availability of oxygen as well as generating more revenue for the hospital due to its commercial quantity.



5:25 PM · Jan 17, 2020 · Twitter for Android

Tweet

Dr Muhammad U. Solomon (@muhagim)

This is the result of good hospital leadership. Can the steps taken by the headship of FMC Ebute Metta be made into a National guide on how to run Government owned Hospitals?
@nmanigeria @nard_nigeria @NGRPresident @Fmohnigeria @AsoRock @MBuhari @APCNigeria
We deserve better.

Jack Obinyan-Buhari (@jackobinyan) · Jan 23

Step by Step we will get there...FMC Ebute Metta, Lagos.



Olaturji Bello @Latunjibello · Jan 19

Replying to @fmceblagos

My wife had myomectomy there August last year, as such I can testify to the facilities and professionalism of the personnel.

LAWRENCE KOTZ @lawrenc... · Jan 16

Replying to @fmceblagos

I am a witness. Well done, @fmceblagos. We appreciate the M.D.

The PUNCH | FMC Ebute Meta
Published July 17, 2019

ALLAN Badamasi, 39 Cemetery Street, Ebute Meta, Lagos State, 081270112: I want to express my gratitude to PUNCH for that lovely feature story on Sunday about the Federal Medical Centre, Ebute Meta. It had tears of joy snaking down my cheeks just listening to the medical director of the facility.

I have always had this uncanny feeling that any public institution that is in the business of generating funds but can hardly keep its head above water is but a cesspool of corruption. First, the Joint Admissions and Matriculation Board, and now, FMC. It is never too late for any government institution which wishes to do so, to tread the path of rectitude.

I feel so great as a resident of Ebute Meta that I almost wish I should fall sick in order to be hospitalised there right now! Hopefully, in due course, medical tourism would be a thing of the past. It is doable. Little drops of water like that. More power to your elbow, Dr Adedamola Dada. Great Nigerian!

Doyin Pearce @McPeezzie · Jan 17

Replying to @fmceblagos

We are proud of the drastic growth of the hospital, Keep it up Mgt of FMC @fmceblagos. You have set the Pace for others to follow

Abiola @d_biola

Replying to @fmceblagos

FMC lagos been upgrading and wowing us since 2018.

9:15 AM · Jan 17, 2020 · Twitter for Android

Remi Sonaiya @olu... · Aug 8, 2019

I'm at the Federal Medical Center, Ebute Meta, Lagos to see someone. I am absolutely impressed by the helpfulness of the staff. Now, I'm watching a ward being cleaned - they're professional! With all the necessary equipment. They've made my day. Who's in charge here? Bravo! #Hope

Replies

Lawrence Ehilegbu @ · Aug 8, 2019

Replying to @oluremisonaiya

Great commendation. If they sustain it for a longer time....it can only be better.





SCENES ànd Sights

SCENES and SIGHTS



A



B



C



D



E

A State Minister for Health flanked by FMC EB Board Chairman Alhaji Ishola Balogun-Fulani and the MD/CEO of FMC EB, Dr. Ademola Dada taking a tour during the inauguration of FMC Ebute-Metta's new Accident and Emergency Building

B Cross-section of staff during the 2019 Annual Management Retreat

C Winners of the 2019 Medical Director's Cup

D Visit by SERVICOM Officials from Presidency, Abuja

E L-R: The Honourable Minister of State for Health, Senator Adeleke Mamora & the Medical Director/CEO FMC Ebute-Metta, Dr. Adedamola Dada; during the Commissioning ceremony of the hospital's Ultra-modern GOPC/Accidents & Emergencies Building Complex



SCENES àND SIGHTS



A



B



C



D



E



F

- A** L-R: Dr. Moma of National Information Technology Development Agency discussing with the MD/CEO Dr. Adedamola Dada during his visit to FMC EB
- B** The Managing Director of Development Bank of Nigeria, Mr. Tony Okpanachi and the MD/CEO Dr. Adedamola Dada
- C** L-R: The former Minister of Health Prof. Isaac Adewole flanked by the MD/CEO FMC EB Dr. Adedamola Dada
- D** L-R: The Permanent Secretary FMOH, Alhaji. A. Marshi Abdullahi, the MD/CEO FMC EB Dr. Adedamola Dada and Engr. Ben of MEDSHARE USA.
- E** Dr. Moma of National Information Technology Development Agency (Right) interacting with the Director Medical Laboratory Services, Mr. C. Onyia (Left) and Head, Corporate Services Mr. O. J. Ayoola (Centre) of FMCEB.
- F** The Permanent Secretary FMOH, Alhaji. A.M Abdullahi (centre) flanked by the MD/CEO and other members of TMC



SCENES and Sights



- A** *The Director of RET, Dr. B.O. Awomoyi flanked by Residency Accreditation team members.*
- B** *Cross-section of Pharmacy staff, celebrating World Pharmacy Day on September 25, 2020*
- C** *Cross-section of Senior Management Staff during Annual Retreat at Epe in Lagos State.*
- D** *Cross-section of staff of Information and Corporate Affairs Department from Federal Teaching Hospital Ido-Ekiti (in yellow disposable PPE) flanked by FMC EB Nursing Officers in Labour Ward Theatre.*



SCENES and Sights



A



B



C



D



E



F

- A L-R: The MD/CEO of FMC EB, Dr. Adedamola Dada and the GM of NTA Channel 10 Lagos, Egnr. Kamarudeen Adegbindin
- B L-R: The MD/CEO of FMC Lokoja, Dr. Babatunde Alabi and his team interacting with Matron V.S. Elisha in one of the FMC EB Wards.
- C L-R: The MD/CEO of FMC EB, Dr. Adedamola Dada and the MD/CEO of FMC Abeokuta, Prof. Adewale Musa-Olomu
- D The Director of Administration, Mr H.H. Etim in sport action during Senior Management Annual Retreat held at Epe in Lagos State.
- E L-R: The MD/CEO of FMC EB, Dr. Adedamola Dada, the former CP of Nigeria Railway Command Mr. Amadi joined by the former MD of FMC EB Dr. Ngozi Nwosu, presenting a Long Service Award to Consultant Physician Dr. O. A. Ajayi
- F The MD/CEO of FMC EB, Dr. Adedamola Dada presenting a gift to Retired Chief Medical Officer, Dr. Omene during Retirees' send-off party.

SCENES and Sights



- A** *Signing of MOU between FMC EB and Nigerian Institute of Medical Research (NIMR)*
- B** *Donation by Nigeria Institute of Medical Research (NIMR)*
- C** *Donation by H.E. Dr. (Mrs) Adejoke Orelope-Adefunke*
- D** *Cross section of Participants at the Annual Management Retreat 2019*
- E** *Trained Biomedical Technicians*

Stop Press

Brief Pictorial Tour

FMCEB

Before
Transformation











...and then
the story
Changed

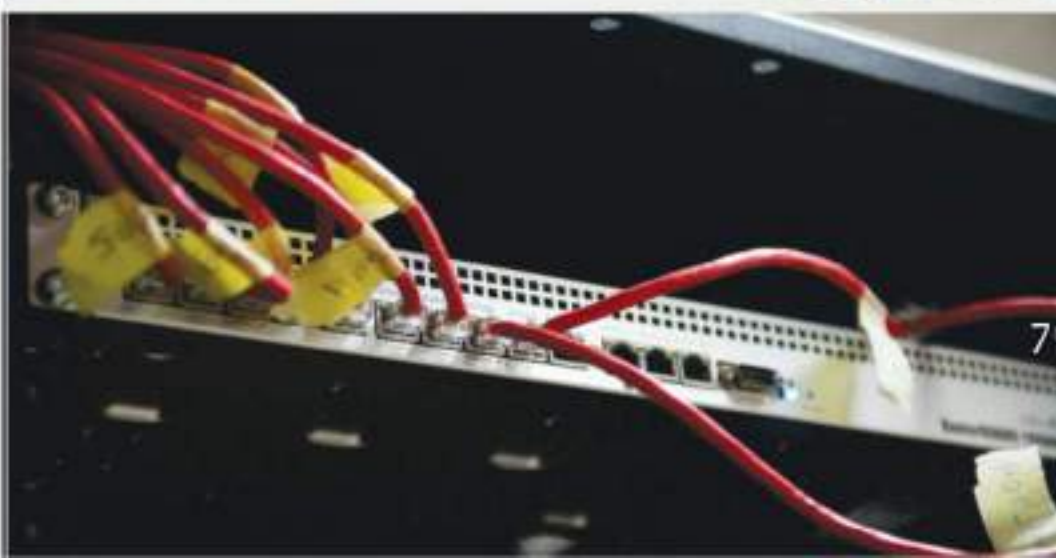
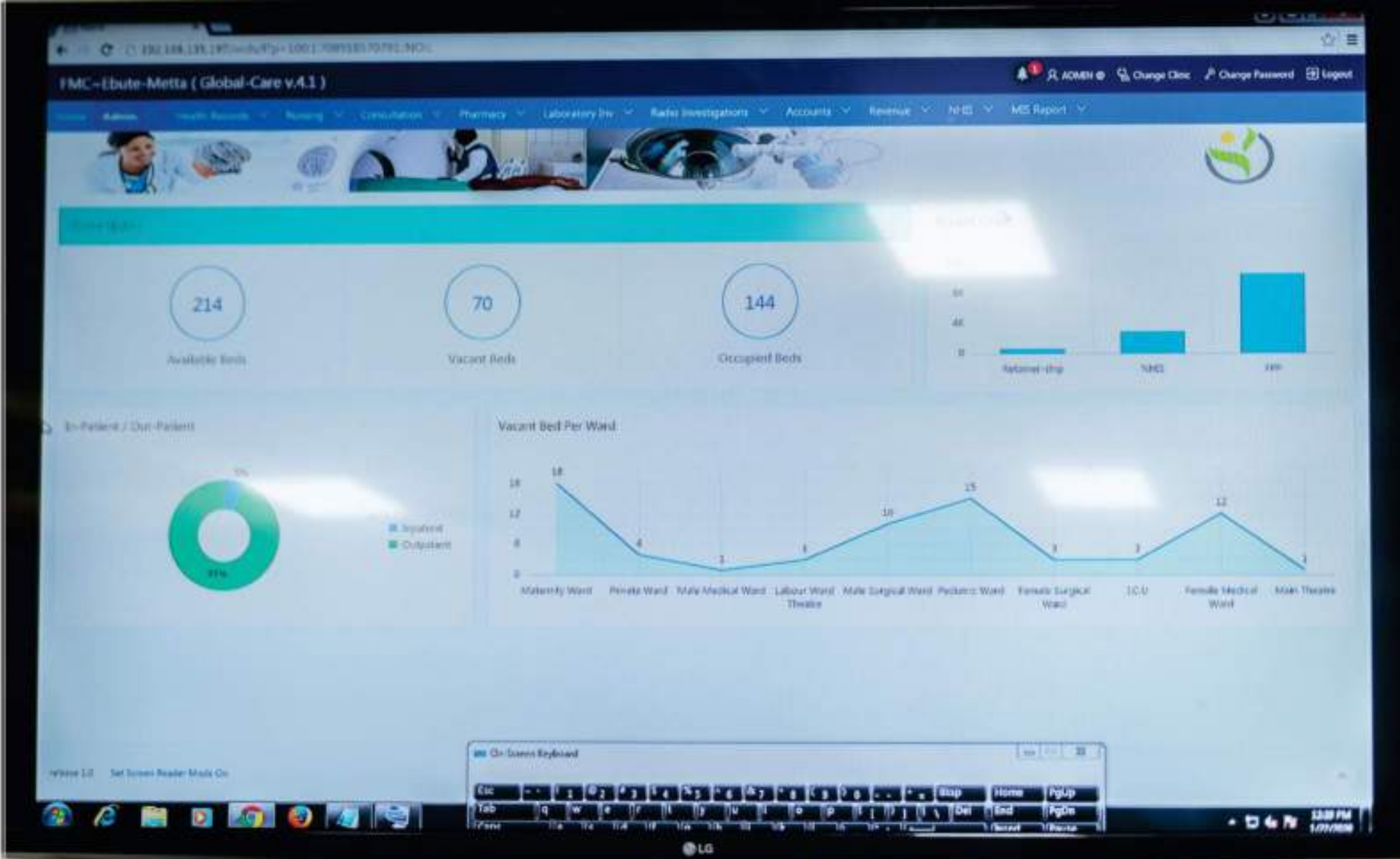






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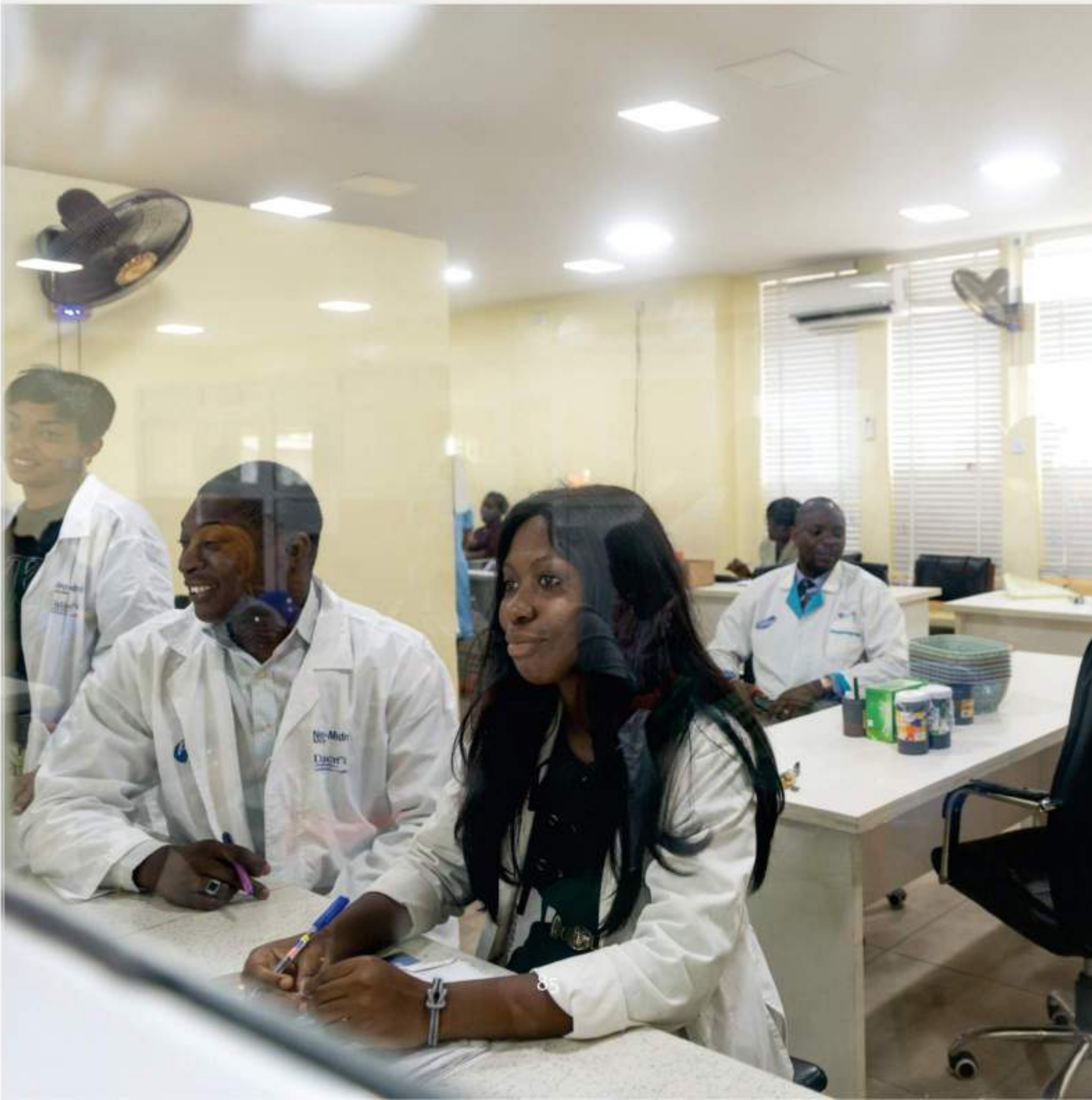




XHZ-90 NEONATE BILIRUBIN PHOTOTHERAPY EQUIPMENT

























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